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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

99999444

Mar 9-4065 USA

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |              |              |                                  |                  |   | SMALL ENTITY TYPE |                        | OTHER THAN<br>OR SMALL ENTITY |                     |                        |
|--|---|---|--------------|--------------|----------------------------------|------------------|---|-------------------|------------------------|-------------------------------|---------------------|------------------------|
| TOTAL CLAIMS   |   |   | 5            |              |                                  |                  |   | RATE              | FEE                    |                               | RATE                | FEE                    |
| FOR  |   |   | NUMBER FILED |              | NUMBER EXTRA                     |                  |   | BASIC FEE         | 370.00                 | OR                            | BASIC FEE           | 740.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | 5 minus 20=  |              | •                                |                  |   | X\$ 9=            |                        | OR                            | X\$18=              |                        |
| INDEPENDENT CLAIMS   |   |   | minus 3 =    |              | · 2                              |                  |   | X42=              | 04                     | OR.                           | X84=                | 6/                     |
| MULTIPLE DEPENDENT CLAIM PRESENT   |   |   |              |              |                                  |                  |   | +140=             | A                      | OR                            | +280=               |                        |
| * If the difference in column 1 is less than zero, enter "0"   |   |   |              |              | r " <b>0</b> " in o              | olumn 2          |   | TOTAL             | THI V                  | OR                            | TOTAL               | 41                     |
| 5-18-0 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |   |   |              |              |                                  |                  | Ĺ | SMALLE            | NTITY                  | OR                            | OTHER<br>SMALL I    |                        |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUM<br>PREVI | HEST<br>IBER<br>OUSLY<br>FOR     | PRESENT<br>EXTRA |   | RATE              | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |
| MQ   | Total   | * 15                                      | Minus        | #2           | 2                                | =                |   | X\$ 9=            |                        | OR                            | X\$18=              |                        |
| ME   | Independent   | · 10                                      | Minus        |              | 2                                | -                |   | X42=              |                        | OR                            | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |   |              |              |                                  |                  | 7 | +140=.            |                        | OR                            | +280=               |                        |
| TOTAL ADDIT. FEE   |   |   |              |              |                                  |                  |   |                   | OR                     | TOTAL<br>ADDIT, FEE           |                     |                        |
|  |   | (Column 1)                                |              | (Colu        | ımn 2)                           | (Column 3        | ) | ADDII. V CL       |                        |                               |                     |                        |
| AMENDMENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUI<br>PREV  | HEST<br>MBER<br>IOUSLY<br>D FOR  | PRESENT<br>EXTRA |   | RATE              | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | •   | Minus        | ##           |                                  | =                |   | X\$ 9=            |                        | OR                            | X\$18=              |                        |
|  | Independent   | *   | Minus        | ***          |                                  | =                | 4 | X42=              |                        | OR                            | X84=                | ·                      |
|  | FIRST PRESE   | NTATION OF M                              | ULTIPLE DE   | PENDEN       | IT CLAIM                         |                  | - | +140=             |                        | OR                            | +280=               |                        |
| TOTAL<br>ADDIT, FEE  |   |   |              |              |                                  |                  |   |                   |                        | OR                            | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)   |   |   |              |              |                                  |                  |   |                   |                        |                               |                     |                        |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NU:<br>PREV  | HEST<br>MBER<br>VIOUSLY<br>D FOR | PRESENT<br>EXTRA |   | RATE              | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus        | ##           |                                  | =                |   | X\$ 9=            |                        | OR                            | X\$18=              |                        |
|  | Independent   | *   | Minus        | ***          |                                  | =-               | 4 | X42=              |                        | OR                            | X84=                |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |              |                                  |                  |   | +140=             |                        | OR                            |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE |   |   |              |              |                                  |                  |   |                   |                        | OR                            | TOTAL               |                        |
| -  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |              |                                  |                  |   |                   |                        |                               |                     |                        |